DOCUMENT RESUME

ED 205 474 SP 018 311

AUTHOR	Clark, Elmer J.: And Others
TITLE	Integrating Skills, Knowledge and Attitudes for Teaching the Handicapped into Regular Teacher Education. Volume I. Deans' Grant Project: First Year Report.
INSTITUTION	Southern Illinois Univ., Carbondale. Coll. of Education.
SPONS AGENCY	Office of Special Education (ED), Washington, D.C.
PUB DATE	80
CONTRACT	790-1158
NOTE	105p.: For related documents, see SP 018 312-313.
EDRS PRICE	MF01/PC05 Plus Postage.
DESCRIPTORS	Behavior Problems: Higher Education: *Individualized Education Programs: *Learning Disabilities: *Mainstreaming: Preservice Teacher Education: Remedial Instruction: Speech Handicaps: *Student Characteristics: Student Evaluation: *Teacher Education Curriculum: *Teacher Role: Visual Impairments
IDENTIFIERS	Deans Grant Project

ABSTRACT

The Deans' Grant Project at Southern Illinois University at Carbondale was planned to prepare regular classroom teachers to work in the mainstreamed environment. Materials and strategies for introducing knowledge and skills into the core sequence of teacher education courses were developed. This volume contains materials and information for two of the basic courses, (1) Human Growth, Development, and Learning, and (2) Basic Techniques and Procedures in Education. In the first section, a discussion is presented, in question and answer format, of the characteristics of handicapped students. Descriptions are provided of handicapping conditions and the problems they present in the classroom. Conditions covered are hearing and visual problems, sensory-motor problems, perception problems, language and math problems, and general classroom behavior problems. In the second section, the role of the regular classroom teacher in the education of the handicapped is discussed. Two case histories are related, and the Individualized Education Program (IEP) developed for each student is outlined. Each IEP was developed by the principal, the director of special education, the math and reading resource teachers, the consulting teacher, the parents, and the student. Selected annotated bibliographies on mainstreaming are included in the appendices. (JD)

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INTEGRATING SKILLS, KNOWLEDGE AND ATTITUDES FOR TEACHING THE HANDICAPPED INTO REGULAR TEACHER EDUCATION

Volume I

Deans' Grant Project: FIRST YEAR REPORT

Office of Special Education - CONTRACT 790 1158

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1980

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Acknowledgments

The preparation of materials for a project such as this Deans' Grant Project could not be accomplished without the support and work of many people. Special recognition should be given to Dean Elmer J. Clark for his support of the project; Dr. Sidney R. Miller who provided special expertise in the area of Special Education; John Sachs and Kanlaya Reuksuppasompon for their work in the library, putting together materials, obtaining materials for faculty, and all those other things graduate assistants are asked to do; Drs. Ronna Dillon, Michael Jackson, Lawrence Dennis, and Arsene Boykin for their willingness to coordinate changes in the basic Teacher Education Sequence courses; and finally to the students who gave feedback on the materials prepared for their classes.

The combined effort of all involved in the Deans' Grant this year was deeply appreciated.

Nancy L. Quisenberry
Project Director

Table of Contents

		Page
Introduction		1
I.	Characteristics of Handicapped Students	3
II.	The Role of the Regular Classroom Teacher in the Education of the Handicapped	19
III.	Glossary	59
IV.	Selected Annotated Bibliography on Mainstreaming	79
V.	Selected Bibliography and Index on Mainstreaming	87
VI.	Illinois Agencies and National Agencies	111

Introduction

The Deans' Grant Project at Southern Illinois University at Carbondale was planned to introduce awareness and informational competencies into regular education teacher preparation. The first year of the project was devoted to developing materials and strategies for introducing knowledge and skills into the core sequence of teacher education courses.

This volume contains materials and information developed for use in two of the basic courses: Human Growth, Development, and Learning and Basic Techniques and Procedures in Education. These materials were prepared for use with all students in teacher education at Southern Illinois University at Carbondale including Elementary Education, Early Childhood (K-3), Secondary (6-12) and Special Certificates (K-12).

Characteristics of Handicapped Students

Question: Why do I need to know about handicapped students?

Answer: In 1975 the United States Congress passed Public Law 94-142. In the law the Congress mandated that all school-aged students must receive a "free and appropriate education in the least restrictive environment." The phrase "...least restrictive environment" has been propogated by the courts and Illinois regulatory agencies to require when possible that the handicapped be placed with non-handicapped peers in an appropriate educational environment, such as a regular classroom or resource room. Thus, the regular classroom teacher is now expected to teach the handicapped student in the regular classroom environment where the child can benefit from such an environment.

Question: What is meant by the term "Least Restrictive Environment?"

Answer: Least Restrictive Environment:

> to the maximum extent appropriate, handicapped children are educated with non-handicapped children. Special classes, separate schooling or other removal of handicapped children from the regular educational environment occurs only when the nature or severity of the handicap requires that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.
>
> Rules and Regulations to Govern the Administration and Operation of Special Education, Section 1.05

Question: What are some of the alternative placements for handicapped students?

Answer: Program placement alternatives or choices, range from totally "non-restrictive" (a regular classroom setting) to a "very restrictive" setting (a non-public residential school for the very severely handicapped). Between the two extremes are many other alternatives. These include:

a) regular class placement with supportive services,
b) regular class placement with some time spent in a resource room setting,
c) part-time special class placement,
d) full-time special class placement,
e) special schools,
f) homebound instruction,
g) hospitals.

Since each child's needs are different, the least restrictive alternative may be different for each child. Therefore, the least restrictive alternative for one child may be regular class placement with

resource room support, while another child might need placement in a special school to receive adequate services. The important question for a parent to ask is "What is the most 'normal' educational placement that my child can work in and benefit from based on his/her needs?"

(Schmidt, 1978)

Question: Can I as a regular classroom teacher now expect to receive all the handicapped students in my classroom?

Answer: No. Only those students who can gain academically and/or socially in the regular classroom will be placed into such environments. In some cases the student placed in the regular classroom will require specialized instruction in a second environment, such as a tutorial center.

Question: You have not answered my question. Can I expect to receive all handicapped students in my regular classroom?

Answer: No. Some students will benefit best when placed in self-contained classrooms or other restrictive environments. The only students you should expect are those who can benefit educationally and/or socially in your classroom.

Question: What is a handicapped student?

Answer: A handicapped student is a student who is not achieving at his/her academic level in a traditional classroom due to a variety of causations, e.g., mentally handicapped, blind, hearing impaired, multiply handicapped, etc.

Question: What age ranges are the schools responsible for?

Answer: Federal and state law require the schools to now serve educationally handicapped students, ages 3-21 years. This means that the schools must go out and identify three-year-old children with existing and/or potential learning problems, and provide them preschool instruction designed to ready them for the regular school environment. For those in their late teens, and early twenties, the school must prepare the student to develop occupational competencies.

Question: What are some specifics of the Federal and Illinois laws?

Answer: State and federal laws require that each handicapped child have an education which:

a) is paid for and supervised by the public schools and meets standards set down by the State and approved by the Federal Government,

b) serves each child's individual needs in the least restrictive environment for that child,

c) serves the child in preschool, elementary, and secondary school (ages 3-21 in Illinois) and,

d) follows the rules for writing an I.E.P.

Question: Who is to receive a free appropriate education under P.L. 94-142?

Answer: All exceptional children must be considered eligible for special education programs in Illinois.

a) mentally impaired
b) hearing impaired
c) speech or language impaired
d) physically & health impaired
e) visually impaired
f) behavior disordered
g) multiply impaired
h) educationally handicapped
i) specific learning disabled

P.L. 94-142 and the Illinois School Code requires that services be provided to all the above specified students ages 3 to 21.

Question: I have heard that though some students may be labelled learning disabled or educable mentally handicapped, they display similar characteristics.

Answer: Yes, that is true, learning disabled and educable mentally handicapped do have similar problems, such as poor attention span, poor language skills and conflict with their peers.

Question: What are some specific areas that a teacher could focus on to identify that a student is educationally handicapped?

Answer: There are some general areas of human development and performance that transcend handicapping condition. These are sensory acuity, perceptual processing, sensory motor, language, mathematics, and general classroom behavior.

Question: What are the sensory acuity problems that interfere with educational growth of students?

Answer: As you well know, there are five senses that are important to the normal development of a child. The two major sensory areas that most educators are concerned with are Hearing and Vision.

Question: Tell me, what are some characteristics of students who are experiencing hearing difficulties?

Answer: Students who are hearing impaired may manifest such behavior as:

a. poor articulation;
b. inappropriate response to questions or no response at all;
c. watching the lips of someone communicating with them; and
d. turning or tilting their head in the direction of sounds which they are seeking to attend to.

Question: Are there any other behaviors that a hearing impaired student might exhibit?

Answer: Yes. A hearing impaired student might appear to be inattentive to classroom discussions, or he/she may seem to ignore verbal directions given by the teacher or other school authority figures.

Question: What are some of the behaviors that a visually impaired student may exhibit in the classroom?

Answer: A visually impaired student may exhibit behaviors such as squinting when looking at objects or persons, rubbing their eyes frequently, tilting their heads to one side when reading, and chronically blinking.

Question: Are there any other characteristics that I should note?

Answer: Visually impaired students may also hold a book at a distance inconsistent with good vision, e.g., too close or too far away from their eyes.

Question: What is a visual perception problem?

Answer: Let me answer the question this way: Perception is the ability to process and organize stimuli, thus visual perception can be broken down into four different areas:

a. Visual discrimination: The ability to differentiate in some manner one form, letter, size, word, or color from another.

b. Visual memory: The ability to reproduce a visually presented stimulus after it has been removed.

c. Visual sequencing: The ability to recall a series of visually presented items in the order presented.

d. Visual figure-ground: The ability to determine irrelevant stimuli, to pick the important stimulus from visually presented material.

(Grotsky, Sabatino, and Ohrtman, 1976)

Question: What are the characteristics of students who have visual perception difficulties?

Answer: A. A student may be unable to select the appropriate stimulus on a blackboard when there are competing stimuli. An example of this would be the student being unable to find a specific word among several other words. (figure-ground)

B. A student may have a problem copying a list of words in the proper sequence. (visual sequencing)

C. A student may be unable to reproduce an object that was presented on a flash card moments earlier. (visual memory)

D. A child may have difficulty discriminating between the letter "b" and the letter "d", or between the number "3" and "8". (visual discrimination)

Question: If there are students who have visual perception problems, are there students who experience auditory perception problems?

Answer: Yes. Auditory perception includes four main areas:

a. Auditory discrimination: The ability to differentiate among sounds.

b. Auditory memory: The ability to retain information which is heard.

c. Auditory sequencing: The ability to recall a series of sounds in the order presented.

d. Auditory figure-ground: The ability to attend to a specific sound stimulus among other (usually less intense) stimuli.

(Grotsky, Sabatino, and Ohrtman, 1976)

Question: What are the characteristics of students who have problems in auditory perception?

Answer: a. A student who is experiencing auditory discrimination problems may not be able to distinguish between the words "fog" and "frog" when presented orally.

b. A student who is having an auditory memory problem would have difficulty repeating a sentence immediately after hearing the sentence.

c. A student who is experiencing auditory figure-ground problems would have difficulty repeating a sentence while other potentially distracting auditory stimuli are present in the environment.

d. A student who is experiencing auditory sequencing problems would have difficulty repeating a series of words in the sequential order that they were presented.

Question: Is sensory-motor critical to learning?

Answer: Yes. As you know sensory-motor is the integration and coordination of the senses with motor activity. This is critical in school related activities like writing, throwing a ball, dancing, and moving through the classroom.

Question: What type of sensory-motor problems might some students exhibit in the classroom or in the playground?

Answer: a) Balance and rhythm: The inability to balance on a board or rail for a brief period of time.

b) Laterality: The inability to develop consistent left or right-sided approach in use of hands or feet.

c) Directionality: The inability to discern left from right, up from down.

d) Body-spatial organization: The inability to maintain gross and fine motor balance and move rhythmatically.

Question: What type of motor problem do handicapped students exhibit?

Answer: a) Gross motor: The inability to use arms and legs effectively, e.g., the inability to walk or run independently or efficiently.

b) Fine motor: The inability to utilize extremities efficiently, e.g., the inability to hold a pencil in the proper position.

Question: What type of sensory-motor problems might some students exhibit in the classroom or in the playground?

Answer: Students with sensory-motor problems may exhibit behavior such as 1) poor handwriting (fine motor), 2) erratic throwing of balls in physical education, the inability to march in cadence with peers, the inability to raise left or right hand when requested, the inability to run or walk in a straight line (gross motor).

A handicapped student may experience a problem in these areas due to disease, poor physical development or surgery but generally they are due to poor sensory and motor integrations.

Question: This is all well and good but what about the areas that I am most concerned about--language, mathematics, and general classroom behavior?

Answer: Let us deal with language first. Language is a very broad area encompassing the communication skills such as reading, writing and oral communication.

I. Reading problems -

Among the classroom characteristics exhibited by handicapped students in the area of reading are:

a) Problems in word attack skills (the inability to analyze words phonetically)

b) Problems in reading comprehensive material (the inability to explain or relate meaningfulness of what the student has previously read.

II. Problems in writing -

a. The inability to express oneself through written language e.g., inappropriate syntax, poor punctuation.

b. Inability to spell words in written form.

III. Problems in oral communication -

a. Spelling: Inability to spell words orally.

b. Articulation: Inability to pronounce words clearly.

c. Fluency and Encoding: Inability to communicate verbally, e.g., hesitation of speech, incoherent speech structure.

The second critical area for the classroom teacher is mathematics. This area can be divided into three broad areas:

I. Problems in number concept: The inability to count and use simple numbers to represent quantity, e.g., the number "2" equals the quantity (2 apples).

II. Problems in arithmetic processes: The inability to add, subtract or divide, e.g., the student might have difficulties in this area due to lack of understanding the symbols such as a +, -, x, or ÷ or the student might understand these concepts but is unable to compute the problem due to organization problem, e.g.,

Correct	Incorrect
1	1
+	+
1	1
2	1 + 1

III. Problems in arithmetic reasoning: The inability to apply basic arithmetic process in personal and social usage of problem solving, e.g., the inability to understand that one dime equals 10 pennies or 2 nickels.

The third critical area that regular classroom teachers are concerned with is the general classroom behavior of their students. Although most students experience some difficulties in school periodically in their educational career, many handicapped students exhibit chronic behavioral problems in the school environment. The chronic behaviors that tend to differentiate the handicapped from the non-handicapped include:

I. Poor Self-Image: This problem frequently results from chronic failure. A handicapped student may manifest this problem in the classroom by making statements such as "I can't do it." or "I won't do it." Such students are often perceived by classroom teachers as "defiant" rather than fearful or frustrated. Some students' self-image becomes so poor that they withdraw from their environment. They will try to avoid interaction with peers and/or teachers.

II. Generalization: Many handicapped students lack the ability to generalize behavioral expectations from one social situation to another.

III. Self-Control: Many handicapped students experience difficulties in controlling their emotions. For example, they might disrupt the class by disregarding the instructions of the teacher. They might lose control due to inability to cope with the frustrations they encounter in the classroom.

Some handicapped students are unable to concentrate on a given task for any length of time (short attention span). Thus, they are constantly moving around in their seat or to different areas of the classroom. This has often been called hyperactivity. This syndrome often gets the student into trouble because he is not doing his/her assignment and/or interfering with other children in the class.

IV. Peer Interaction: Many handicapped students have poor peer interaction which results from being rejected because they are functioning at a level discordant with other students at the presumed same level of development. Handicapped students may react to this by being aggressive towards other individuals, or objects within their environment and/or with withdrawal from group activities.

Question: Is Generalization a common problem for handicapped students?

Answer: Yes, in discussing the problem that handicapped students exhibit, you may have noted that one problem can occur in language, mathematics, and general classroom behavior, and that is the inability to generalize. Let's first review an example in each of these areas:

a. Language:

The inability to generalize the word "car" to the motor vehicle.

b. Mathematics:

The inability to generalize that "10" equals the quantity ten.

c. General Classroom Behavior:

The inability to understand the difference between hugging a friend during play time, and hugging someone who does not even know who is hugging him.

This problem does not necessarily occur in all three areas at the same time, but may be indicative of a student who has not developed certain cognitive and social skills due to a handicapping condition.

Question: What procedures do I follow if a student in my class is not functioning despite my efforts and the student exhibits behaviors that suggests the student is handicapped?

Answer: The appropriate procedure for you to follow is to make a referral. A referral is a formal procedure requesting an evaluation of the student, to establish the individual's current level of performance and specific educational service needs.

Question: To whom and how do I make a referral?

Answer: Each school or school district will designate an individual or individuals who will assist teachers in making out a referral and receiving

that referral. The designated individual and procedure will vary from one school district to another.

Question: What if I have some other questions concerning this referral procedure?

Answer: Contact the person who is responsible for implementing referrals in your school or school district, or if you cannot easily identify this individual, contact the principal or other appropriate school personnel.

Summary

Now that we have discussed some of the generic characteristics that handicapped students may exhibit in the classroom, you should be able to identify these characteristics:

I. Hearing problems -

- a. Poor articulation
- b. Watching lips
- c. Inappropriate or no response
- d. Turning or tilting head
- e. Inattentive behavior
- f. Ignoring verbal directions

II. Visual problems -

- a. Squinting
- b. Continuously rubbing eyes
- c. Tilting head to one side

III. Perception problems -

1. Visual perception
   - a. Visual discrimination
   - b. Visual memory
   - c. Visual sequencing
   - d. Visual figure-ground
2. Auditory perception
   - a. Auditory discrimination
   - b. Auditory memory
   - c. Auditory sequencing
   - d. Auditory figure-ground

IV. Sensory-motor problems -

- a. Balance and rhythm
- b. Laterality
- c. Directionality
- d. Body spatial organization

V. Motor problems -

- a. Gross motor
- b. Fine motor

VI. Language problems -

a. Reading
b. Writing
c. Oral Communication

VII. Mathematic problems -

a. Number concepts
b. Arithmetics processes
c. Arithmetics reasoning

VIII. General classroom behavior problems -

a. Poor self-image
b. Generalization
c. Self-control
d. Peer interaction

IX. Review of problems in generalization -

a. Language
b. Mathematics
c. General classroom behavior

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The Role of the Regular Classroom Teacher

in the Education of the Handicapped

The Role of the Regular Classroom Teacher

in the Education of the Handicapped

Question: Why does the regular classroom teacher have to be concerned with the education of the handicapped?

Answer: In 1975 the United States Congress passed Public Law 94-142 (The Education for All Handicapped Children Act), which requires that all children and youth must be provided a free and appropriate education. The concept of appropriate education has been taken to mean that if a student can function in a regular classroom with a regular teacher, then that student must be placed in the regular school environment.

Question: Can you be more explicit?

Answer: The law says that the state educational agency must demonstrate that: "The state has established (A) procedural safeguards as required (B) that the procedures assure that handicapped students, including those in public or private institutions or other care facilities, are educated with students who are not handicapped. It also requires that placement in special classes and/or separate building occurs only when the nature of or severity of the handicap is so severe that educators in the regular classes with use of supplementary aids and services cannot satisfactorily educate the student.

Question: Those are nice concepts, but exactly what is my role as the regular classroom teacher in the education of handicapped students?

Answer: The regular classroom teacher's first responsibility is to make a referral when a student is not achieving due to a suspected handicapping condition.

Question: What is a referral?

Answer: A referral is a formal process in which the regular classroom teacher notifies school authorities that he or she has a student in class with suspected handicapping problems.

Question: To whom do I make this referral, and is the regular classroom teacher the only person who can make a referral?

Answer: a) Your local school district is responsible for designating to whom referrals are to be sent.

b) No! Referrals can be made by the parent, local school personnel, community services agencies, persons having primary care and custody of the child, other professional persons having knowledge of the child's problems, the child or the Illinois State Board of Education.

Rules and Regulations to Govern the Administration and Operation of Special Education
Section 9.03.2

Question: Once the referral for a case study evaluation is made, what function does it perform?

Answer: After the local school district receives permission from the parents or a hearing officer, they are then responsible for conducting a case study evaluation that reflects the problems cited by the referring teacher and a follow-up observation made by personnel developing the case study.

Question: Who conducts the case study evaluation?

Answer: A multidisciplinary team composed of professionals representing various disciplines in education, psychology, and health. The team is composed of:

1) appropriate representative(s) of the child's local school district, i.e., the principal or someone who has written authority to provide services,

2) Special Education Director or designees,

3) all school personnel involved in the evaluation of the child, i.e., school psychologist, special education teacher,

4) parent or guardian,

5) other persons having significant information about the child, i.e., the regular classroom teacher, special education teacher,

6) those persons who may become responsible for providing the special education program or services to the child,

7) the child (where appropriate),

8) other individuals at the discretion of the parents, i.e., lawyer, child advocate, and

9) other individuals at the discretion of the district.

Rules and Regulations to Govern the Administration and Operation of Special Education
Section 9.15.1

Question: Does this team determine the appropriate educational placement of a student?

Answer: Yes. The team in consultation with other school personnel and the student's parents decide the placement and program for the student.

Question: If the multidisciplinary team decides that a student is handicapped and shall stay in the regular classroom, how can I develop a program for this student if I haven't had any training?

Answer: A handicapped student's educational program is then developed at an Individual Education Program (I.E.P.) meeting. The I.E.P. is a written statement for an exceptional student that provides at least a statement of: The student's present levels of educational performance; annual goals and short-term instructional objectives; specific special education and related services; the extent of participation in the regular education program; the projected dates for initiation of services; anticipated duration of services; appropriate objective criteria and evaluation procedures; and a schedule for annual determination of short-term objectives.

Rules and Regulations to Govern the Administration and Operation of Special Education
Section 1.02a

Question: Can you please explain the sub-components of the I.E.P.?

Answer: Yes. The I.E.P. can be broken down into five components as stated in Illinois Rules and Regulations to Govern the Administration and Operation of Special Education, 9.18a.4.

I. The child's present levels of performance

This report should include a summary of the area study evaluation. This information should be based on informal and formal evaluation procedures, e.g., parent and teacher observation, teacher-made tests and criterion-referenced tests. The I.E.P. should reflect the student's strengths and weaknesses in areas pertaining to his/her education needs.

II. Annual goals including short-term instructional objectives

A. Annual goals: are to be specific enough to develop a curriculum to reach that goal, e.g., a student will learn to read on the third grade level.

B. Short-term objectives: are the sequenced steps that a student will be required to achieve the annual goal. Each short-term objective must contain:

1. A behavior that the child must demonstrate,

2. The condition under which the behavior is to be exhibited,

3. Evaluative criteria, e.g., the student will correctly identify 25 words most commonly found in 3rd grade textbooks when presented on flash cards with 95% accuracy.

III. Special education and related services: must include a statement of specific special education to be provided to the child. This will include:

A. Placement - which education setting along the continuum from the least restrictive environment (regular classroom) to the most restrictive (residential placement) is the most appropriate for the education of the student.

B. Physical education - A handicapped student is to receive physical education in the regular class unless the student is placed in a separate school or he/she needs a special physical education program developed as prescribed by the student's Individual Education Plan.

C. Vocational/Career education -

"It is the position of the U.S. Office of Education that appropriate comprehensive vocational education will be available and accessible to every handicapped person" September 25, 1978, Federal Register.

The role of the vocational/career educator may include:

1. Participation in the meetings to develop, review and revise the I.E.P.;

2. Defining those programs, courses in which the handicapped student will be participating;

3. Identifying the related services needed to carry out such activities in regular vocational programs;

4. Providing or assisting with referral for vocational counseling and guidance service;

5. Providing or assisting with work experience program for handicapped students;

6. Providing or assisting with job placement and follow-up.

D. Related Services: Related service and the developmental corrective, and other supportive services which are required to assist a handicapped child in benefiting from special education and include:

1. Speech pathology and audiology,
2. Psychological services,
3. Physical and occupational therapy,
4. Recreation,
5. Early identification and assessment of disability in children,
6. Counseling service,
7. Medical services for diagnostic or evaluation purposes,
8. School health services,
9. Social work service,
10. Parent counseling and training,
11. Transportation.

Rules and Regulations to Govern the Administration and Operation of Special Education, --1.08a, 13.03a, and 13.03b.

IV. Projected dates for initiation of services and anticipated duration of services.

The projected dates for initiation of services and the anticipated duration of the services; (Rules and Regulations to Govern the Administration and Operation of Special Education, 9.10a 4d).

In addition to initial placement conferences and/or I.E.P. meetings, the educational status and continual special education placement of each child should be reviewed at least annually in a conference attended by those professional persons working with the student, the parents, the child where appropriate, the special education director or designee who is qualified to supervise the provision of special education, and other individuals at the discretion of the parent or local district.

Rules and Regulations to Govern the Administration and Operation of Special Education, 9.25.

V. Appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether the short-term objectives are being achieved.

1. Utilizing appropriate evaluation information, including teacher and parent opinions, the annual review shall determine the extent to which the child has met the objectives and goals as specified in the child's I.E.P. and recommend further evaluation or revise the child's I.E.P.

2. When further evaluation is indicated, pursuant to the annual review, a review of the child's status as requested by the teachers, parents, other knowledgeable persons, or as a result of an impartial due process hearing, such an evaluation shall be completed within sixty (60) days.

3. A reevaluation of the child shall be conducted every three years or more frequently if conditions warrant or if the child's parent or teacher requests an evaluation.

Rules and Regulations to Govern the Administration and Operation of Special Education, 9.25

The Role of the Classroom Teacher

The following mandates may be interpreted as relating to the regular education teacher's role:

1. Participating in the multidisciplinary conference and/or I.E.P. meeting as appropriate;

   (For a handicapped child who is being considered for placement in special education, the "teacher" could be the child's regular teacher, or a teacher qualified to provide education in the type of program in which the child may be placed, or both)

Additional responsibilities may include:

2. Working cooperatively with special education personnel;

3. a. providing information on the child's history of performance in the regular classroom, and/or

   b. providing information on the child's anticipated adjustment to the regular classroom environment;

4. Offering input in the team development of long-range and annual goals and short-term objectives;

5. Implementing those goals and objectives specified in the I.E.P. which may require modification of the regular curriculum within the regular classroom;

6. Frequently monitoring the child's progress toward the accomplishment of the goals and objectives which they are responsible for implementing;

7. Communicating the child's ongoing progress to parents;

8. Evaluating, at least annually, the child's progress toward the accomplishment of the goals and objectives which they are responsible for implementing;

9. Reviewing the evaluation data in order to provide recommendations for possible I.E.P. revision.

Illinois Primer on Individual Education Programs, 1979

Question: Who participates in the I.E.P. meeting?

Answer: This meeting shall include:

1. The parent or guardian,

2. The child when appropriate,

3. Other individuals at the discretion of the parents, i.e., lawyer, child advocate,

4. Other individuals at the discretion of the district,

5. Evaluation team member or representative of local district, child's teacher or some other person knowledgeable about evaluation procedures used with the child and is familiar with the results of the evaluation,

6. The child's teacher (at least one past, present, and future regular teacher or special education teacher--what teacher and number is at the discretion of the local district).

Illinois Primer on Individual Education Programs, 1979

Question: Is an I.E.P. a legally binding document?

Answer: According to the Federal Register (Aug. 23, 1977, Sect. 121a.349), each public agency must provide special education and related services

to a handicapped child in accordance with an individualized education program. However, Part B of the Act (P.L. 94-142) does not require that any agency, teacher, or other person be held accountable if a child does not achieve the growth projected in the annual goals and objectives.

Question: Will other school personnel have handicapped students placed in their classroom, e.g., music teacher, art teacher, etc.?

Answer: Yes. Quite often these classroom teachers are the first integrating experience for handicapped students.

Question: What if you have a student who requires special services that are not available locally?

Answer: The school is responsible for acquiring outside assistance.

Question: What can I do when a handicapped student who has been mainstreamed into my classroom is unable to function properly?

Answer: The first thing to do is to contact the special education teacher, the psychologists, or speech therapists and seek assistance. If such assistance is not working and it is apparent that the student's I.E.P. is inappropriate, you should seek to convene a meeting of the multidisciplinary team and parents as soon as possible.

Question: Why are parents involved in the process of developing the child's I.E.P.?

Answer: a) To insure the child's rights to an appropriate educational placement and program,

b) Many parents can contribute pertinent information concerning the education of their child.

REFERENCES

Rules and Regulations to Govern the Administration and Operation of Special Education. Springfield, Ill.: Illinois Office of Education, February 1979.

Schmidt, C. and Williams, M.C. Law and the Handicapped Child: A Primer for Illinois Parents. Northern Illinois University, Dekalb, Ill.: Illinois Regional Resource Center, June 1978.

The Illinois Primer on Individualized Education Programs. Springfield, Ill.: State Board of Education, Illinois Office of Education, Department of Specialized Educational Services, Illinois Regional Resource Center, June 1979.

APPENDIX A

Case Study - Jason Roberts

REFERRAL

Jason Roberts is a ten-year-old boy who is enrolled in the fifth grade elementary classroom. He has been referred by his classroom teacher due to poor academic progress and possible emotional problems. According to Jason's parents and his school records, Jason began experiencing difficulties in the third grade. He is barely functioning on the third grade level in reading and functioning on the fourth grade level in math. He often is unable to participate adequately in the fifth grade activities. This lack of participation has led to behavioral difficulties, particularly fighting.

Case Study Evaluation

Mr. and Mrs. Roberts consented to a case study evaluation of Jason's academic and school behavior. Mr. and Mrs. Roberts explained that they were experiencing problems at home and were concerned about Jason's academic progress. They were extremely helpful and forwarded the results of a comprehensive medical examination to the school. The results of this examination were included in the case study evaluation.

The school psychologist, resource teacher, and educational diagnostician administered several different tests to Jason in order to assess his strengths and weaknesses.

Medical Report

Jason is a healthy boy who is of average height and weight. His hearing was tested by an audiologist and was diagnosed as normal. Jason's vision was tested by an optometrist. The diagnosis was normal vision: 20/20 in both eyes with no indication of any problems concerning Jason's vision, e.g., stigmatism, muscle control, etc.

Psychological Report

The Wechsler Intelligence Scale for Children R:

Verbal I.Q.	= 80
Performance I.Q.	= 92
Full Scale	= 86

Behavioral Observations:

Jason greeted me with a friendly smile. He seemed to feel comfortable

with me, but appeared nervous about being tested. He commented, "I'm not good at reading," and "If it's too hard, I'm going to quit!" He said this in a "tough-guy" voice to convince me that I could not force him to complete something he did not want to do. Although Jason presented this front, he immediately became involved in the items presented on the tests. The discrepancies between his verbal and performance scores indicate that Jason may have a learning disability.

Developmental Test of Motor Integration (V.M.I.)

Test age = 7 years, 5 months

Bender Visual - Motor Gestalt Test

Test age = 7 years, 10 months

Peabody Picture Vocabulary Test Form B

Test age = 9 years, 8 months

Wide Range Achievement Test

Reading	3.1
Spelling	3.0
Math	4.5

Woodcock Reading Mastery Test

	Grade Equivalent:
Letter Identification	3.0
Word Identification	3.0
Word Attack	3.1
Word Comprehension	3.0
Passage Comprehension	3.2
Total Score	3.1

Informal Reading Inventory

Basal Reading Level	3.0

Key Math

I Content

a) Numeration	4.0
b) Fractions	3.0

	c) Geometry and symbols	3.0
II	Operations	
	d) Addition	4.5
	e) Subtraction	4.5
	f) Multiplication	4.5
	g) Division	4.0
	h) Mental computation	4.0
	i) Numerical Reasoning	4.0
III	Applications	
	j) Word problems	3.0
	k) Missing elements	3.5
	l) Money	4.0
	m) Measurement	4.0
	n) Time	4.0
	Overall Total	3.8

Multidisciplinary Conference

Three weeks after the Roberts consented to a case study evaluation, a multidisciplinary conference was held at Jason's school to synthesize the evaluation results. Present at this meeting were Jason's regular classroom teacher, Mrs. Abrams; the LD resource teacher, Mrs. Webb; the school psychologist, Mr. Simon; the principal, Mrs. Stern; the director of the special education for the county, Mr. Hernandez; and Mr. and Mrs. Roberts.

Mrs. Abrams explained to everyone at the meeting the reasons for referring Jason for a case study evaluation. Mr. Simon, the school psychologist and Mrs. Webb, the resource teacher, discussed the types of the tests they administered and the meaning of the scores Jason had attained.

Jason's score on the Wisc-R was in the borderline range, but he scored a 9.8 on the P.P.V.T. which indicated that Jason can function on grade level when tested with a non-verbal instrument.

Jason's scores on the V.M.I. (7.5) and the Bender Visual-Motor Gestalt Test (7.10) indicated that he is experiencing difficulties integrating motor responses with visual images. This may be the cause of Jason's reading problems.

Jason scored an average of two years behind in reading and spelling and almost at 4.5 grade level on the math section of the Wide Range Achievement Test. The reading and spelling scores are supported by the results of the Woodcock Reading Mastery Test and the Informal Tests that were given. Jason's scores on the Key Math were scattered, with weak areas in Fractions, Geometry, Mental Computation, Word Problems, Missing Elements. Other scores were almost on grade level in Addition, Subtraction, Multiplication, Money and Time.

These results indicate that Jason has the most difficulty in language ability (low scores on Wisc-R, WRAT and Woodcock), but can function on grade level in Math (money, time, adding, etc.). The extreme low scores on the Word Problem section of the Key Math also indicate that Jason's weakest area is in reading skills.

Jason's problem in classroom behavior seems to occur during reading or oral discussions or when he is frustrated. His fighting usually was in response to teasing by the other children.

The results of this meeting were discussed by all persons present and it was decided that a decision concerning placement and programming should be determined at a separate I.E.P. meeting. Mr. and Mrs. Roberts agreed to participate in the I.E.P. meeting as soon as it was possible for all those concerned to be present.

Individual Education Program Meeting

One week after the multidisciplinary conference, an Individual Education Program meeting was conducted. Persons present were: Mr. and Mrs. Roberts; the special education director, Mr. Hernandez; the school psychologist, Mr. Simon; the regular classroom teacher, Mrs. Abrams; the LD resource teacher, Mrs. Webb; the principal, Mrs. Stern; and the consultant teacher, Mr. Smith.

Evaluation of the results of the multidisciplinary conference were discussed as well as the different alternatives available for remediation of Jason's reading and behavior problems. It was decided that Jason would remain in his regular classroom, but would go to the LD resource teacher once a day for forty minutes of remediation in reading. The consultant teacher was assigned to work with the student and regular classroom teacher for two hours a week. In two months a meeting will be held to decide if the consultant teacher should continue working in the classroom. It was felt that Jason's problems were not severe enough for placement in a self-contained classroom.

Mr. and Mrs. Roberts agreed to this placement and signed the appropriate consent form.

Appendix B immediately following contains an Individual Education Program with all program recommendations decided upon by the committee.

APPENDIX B

Sample Individualized Education Program

for

Jason Roberts

Note: The following sample I.E.P. form does not represent state-adopted or required forms.

Individual Education Program (IEP)

Yearly Class Schedule

	Time	Subject	Teacher
1st Semester	8:30- 9:20	Math	Abrams
	9:30-10:20	Social Stud.	Abrams
	10:30-11:20	Reading	Webb - Resource
	11:20-12:20	Lang. Arts	Abrams
	12:20- 1:10	Lunch	Abrams
	1:10- 2:00	Art/Music	Jones/ Smith
	2:10- 3:00	P.E.	Snider
2nd Semester			

Checklist

10/1/79 Referral by Regular teacher

10/2/79 Parents informed of rights; permission obtained for evaluation

10/14/79 Evaluation compiled

10/15/79 Parents contacted

10/21/79 Total committee meets and subcommittees assigned

10/24/79 IEP developed by subcommittees

10/24/79 IEP approved by total committee

Committee Members

Mrs. Abrams

Teacher

Mr. Hernandez

Other LEA representative

Parents

Mr. & Mrs. Roberts

Mrs. Webb

Date IEP initially approved: 11/1/79

Health Information

Vision: Good

Hearing: Good

Physical: Good

Other: None

Testing Information

Test Name	Date Admin.	Interpretation
Wisc - R	10/14/79	V=80 P=92 F=86
V.M.I.	10/15/79	7 yrs., 5 mths
BMGST	10/17/79	7 yrs., 10 mths
PPVT	10/17/79	9.8
WRAT	10/18/79	R=3.1S=3.0M=4.5
Woodcock	10/19/79	3.0
Key Math	10/20/79	3.8

Identification Information

Name Jason Roberts

School Franklin Elementary

Birthdate 5/9/69 Grade 5th

Parent's Name Mr. & Mrs. Frank Roberts

Address 2008 Roblee Street

Phone: Home 683-9999 Office 693-9949

Continuum of Services

	Hrs. per week
Regular class	27
Resource teacher in regular classroom	3¼
Resource room	
Reading specialist	
Speech/language therapist	
Counselor	
Special class	
Transition class	
Others:	
Consultant teacher	2

Individual Education Program (IEP)

Student's Name Jason Roberts Subject Area Reading

Level of Performance Reading-Performing on third grade level Teacher Mrs. Webb

Annual Goals: 1. Increase reading ability from 3.0 grade level to 4th grade level through one-one instruction and small group interaction.

2. Decrease physical aggressiveness and increase peer relations through individual counseling and consultative services.

	September	October	November	December	January
Objectives		Referral	1. The child will be able to read 40 new sight words presented visually with 100% accuracy. 2. Child will participate in an individual non-instructional activity for 10 minutes a day. 3. Attend peer group discussion and role playing situations concerning feelings 3 times per week.	1. The child will be able to identify the vowel sounds when presented visually and orally with 100% accuracy. 2. Child will participate in an individual non-instructional activity for 20 minutes a day. 3. Participate in discussion and role playing situations concerning feelings.	1. The child will complete the first 3 stories of the 3rd grade reader with 75% accurate word recognition on one-page sample tests. 2. The child will participate in a group non-instructional activity for 10 minutes a day. 3. Participate in discussion and role playing situations concerning feelings.
Materials			1. Dolch flash cards 2. Crafts	1. Language master flash cards 2. Crafts	1. McMillian third grade reader 2. Group games
Evaluation Agent			L.D. Resource & Consultant	L.D. Resource & Consultant	L.D. Resource & Consultant
			Informal Assessment Anecdotal Records	Informal Assessment Anecdotal Records	Informal Assessment Anecdotal Records

Individual Education Program (IEP)

Student's Name Jason Roberts Subject Area Reading

Level of Performance Reading on third grade level Teacher Mrs. Webb

Annual Goals: 1. Increase reading ability from 3.0 grade level to 4th grade level through one-one instruction and small group interaction.

2. Decrease physical aggressiveness and increase peer relations through individual counseling and consultative services.

	February	March	April	May	June
Objectives	1. Review & correctly pronounce 40 previously learned sight words w/ 100% accuracy. 2. Recognize & correctly say 5 words containing vowels previously learned w/ 100% accuracy 3. Review previous stories. Read w/ 75% accuracy in word recognition on 1 page sample test 4. Review anecdotal records of Jason's behavior during role playing situation & discussion.	1. Review anecdotal records and interview classroom teacher	Evaluation Post test on WRAT Woodcock Oral Reading Test		
Evaluation Materials		Informal and Anecdotal records			
Agent	LD Resource and Consultant teacher	LD Resource and consultant teacher	Committee members		

APPENDIX C

Case Study - Robert Fredericks

Referral

Robert Fredericks is a fourteen-and-one-half year old boy, who has just been admitted to the ninth grade. Robert has been referred by his English teacher, Mrs. Matthews and his Mathematics teacher, Mrs. Weintraub, for refusing to attempt classroom assignments and constant disruptive behavior.

Case Study Evaluation

Mr. and Mrs. Fredericks indicated that they knew that Robert was experiencing difficulties in English and Mathematics, but were extremely surprised and concerned about Robert's disruptive behavior. They indicated that Robert's past school reports indicated that he was behind in Math and English, and that he was a quiet, reserved boy who was always respectful of his teachers and adults.

Mr. and Mrs. Fredericks consented to a case study evaluation and indicated that they would help in any way that they could. A medical report which included Robert's developmental history from birth to present was forwarded to the school psychologist.

The school psychologist, resource teacher, and educational diagnostician administered several different tests to Robert in order to assess his academic and social abilities. A school social worker was asked to interview Robert to explain the reasons for the diagnostic tests and his rights in the decision process.

Medical Report

Robert's medical report indicated that he was of average height and weight. His hearing was diagnosed as normal by an audiologist. Robert's vision was assessed by an optometrist and diagnosed as normal: 20/20 in both eyes. Tests also indicated that Robert was not experiencing any difficulties with eye muscle control or any indication of a stigmatism.

Psychological Report

The Wechsler Intelligence Scale for Children R:

Verbal I.Q. = 85

Performance I.Q. = 96

Full Scale = 88

Behavioral Observations:

Robert was quiet but very cooperative, even though he said he was very nervous. When taking the Arithmetic section of the test, Robert started to mumble under his breath and began squirming in his seat. He asked politely if he could stop taking the test. I indicated it would be helpful if he continued to take the test and complete what he could. He agreed to continue and did not mumble or squirm in his seat.

Key Math Diagnostic Test

		Grade Equivalent
I	Content	
	a) Numeration	6.0
	b) Fractions	4.0
	c) Geometry and Symbols	4.0
II	Operations	
	d) Addition	6.0
	e) Subtraction	6.0
	f) Multiplication	5.5
	g) Division	4.0
	h) Mental computation	5.0
	i) Numerical Reasoning	5.5
III	Applications	
	j) Word problems	6.0
	k) Missing elements	5.5
	l) Money	6.0
	m) Measurement	5.5
	n) Time	5.5
		Overall Total 5.3

Basic Educational Skill Inventory - Math: Level B

Robert's strengths were in addition facts, subtraction, multiplication facts, addition problems, subtraction problems, and multiplication problems.

He generally was able to perform at about the sixth grade level. His weakest areas were working with fractions, division, geometry, and decimals. Material above the fourth grade level was not attempted.

Wide Range Achievement Test

	Grade Equivalent
Reading	4.5
Spelling	5.0
Math	4.6

Woodcock Reading Mastery

Letter Identification	6.0
Word Identification	5.0
Word Attack Skills	4.6
Word Comprehension	4.0
Passage Comprehension	4.2
Total Reading	4.76

Social Worker Report

Robert is soft-spoken, and a child who does not like getting into trouble. He explained that when he gets extremely frustrated in Math or English class, he loses control. Robert said, "I hate going to English and Math." When asked how he felt about his teachers, Robert said they were good teachers, but that they didn't have enough time for him.

Multidisciplinary Conference

One week after the completion of all the diagnostic tests, a multidisciplinary conference was conducted. Present at this meeting were: the parents, Mr. and Mrs. Fredericks; the student, Robert; the math teacher, Mrs. Weintraub; the English teacher, Mrs. Matthews; the school psychologist, Mr. Franklin; the principal, Mrs. Hernandez; the director of special education, Mr. Klein; the educational diagnostician, Mrs. Adams; and the school social worker, Mrs. Schmidt.

Mr. Klein explained the reasons for the referral and thanked everyone concerned for their cooperation. Mr. Klein asked the school psychologist

and the educational diagnostician to describe the tests that they administered to the committee and to discuss the meaning of the results.

Mr. Franklin reported the scores that Robert achieved on the W.I.S.C.-R.

Verbal I.Q.	= 85
Performance I.Q.	= 96
Full Scale	= 88

The psychologist explained that Robert's 85 verbal I.Q. was one standard deviation below other students his age. His performance I.Q. was within the normal range. The combined verbal and performance scores reveal a full scale score of 88, which is within the normal range. Mr. Franklin explained that Robert scored highest in Information and Similarities and lowest in coding, object assembly and arithmetic.

Mr. Franklin discussed Robert's reaction to the majority of test items as calm and collected. He also indicated that Robert exhibited low frustration tolerance on the arithmetic section of the test.

Mrs. Adams reported the results of the Key Math Diagnostic test. The results revealed a total score of 5.3. Robert was able to complete most of this test except in sections that were frustrating (fractions, decimals, division).

The results of the Basic Educational Skills Inventory Math - Level B indicated that Robert was able to comprehend basic arithmetic skills such as counting, adding, subtracting, and even simple multiplication, but had great difficulty in understanding fractions, decimals, and division. Mrs. Adams concluded that Robert's frustration is due to the fact that he is three years behind in most math skills and indicated that Robert displayed some characteristics of a learning disabled student.

Robert's scores on the Wide Range Achievement Test and Woodcock indicate that he is capable of reading material on the fourth grade level. He seems comfortable with identifying words that are familiar and has difficulty with reading material that requires more proficient skills in decoding new words and comprehension of reading material in fifth grade or higher.

Mr. Klein asked Mrs. Schmidt, the social worker, to discuss the results of her meetings with Robert.

Mrs. Schmidt explained that Robert really did not want to make any trouble for the teachers or the school. His behavior seems to be a reaction to the frustration he experiences when confronted with work he cannot do, which makes him feel inadequate. Mr. Klein asked Robert if he agreed with Mrs. Schmidt's statements. Robert's response was "Yes, I get very nervous." Mrs. Schmidt indicated that Robert's reaction to his math and English classes is not unusual and that the problem could be alleviated if an appropriate program was developed to meet Robert's needs.

Mr. Klein then asked Robert if he had any questions or any information he would like to contribute to the meeting. Robert indicated that he agreed with everything that had been discussed and hoped that a solution could be found.

Mr. Klein informed the parents and Robert that a consent form must be signed giving permission for an I.E.P. meeting to be convened in order to decide upon appropriate program and placement for Robert.

Individual Education Program Meeting

Mr. Klein, the director of special education, arranged for an Individual Education Program meeting one-and-a-half weeks after the multidisciplinary conference. Persons present were: the parents, Mr. and Mrs. Fredericks; the student, Robert; the principal, Mrs. Hernandez; the director of special education, Mr. Klein; the reading resource teacher, Mrs. Crantz; the math resource teacher, Mr. Simon; the social worker, Mrs. Schmidt; and the consultant teacher, Mr. Snider.

Evaluation of the multidisciplinary team's findings were discussed, including different programs that would be appropriate for Robert's educational and emotional problems. It was decided that Robert would attend the LD resource room for English and Mathematics 5 hours a week. The consultant teacher would work with Robert and his other classroom teachers one hour per week. The school social worker would meet with Robert once a week for a one-hour session.

The team also decided that Robert would attend a vocational class that was of interest to him. Robert said he was interested in print shop because he sometimes helped out at the local printers. The shop teacher was to be notified by the committee of this decision. The consultant teacher would discuss Robert's strengths and weaknesses with the shop teacher in order that an appropriate program could be developed.

Appendix D immediately following contains an Individual Education Program with all program recommendations decided upon by the committee.

APPENDIX D

Sample Individualized Education Program

for

Robert Fredericks

Note: The following sample I.E.P. form does not represent state-adopted or required forms.

Individual Education Program (IEP)

Checklist

9/3/78	Referral by Mrs. Matthews & Mrs. Weintraub
9/12/78	Parents informed of rights; permission obtained for evaluation
9/27/78	Evaluation compiled
9/30/78	Parents contacted
10/2/78	Total committee meets and subcommittees assigned
10/12/78	IEP developed by subcommittees
10/14/78	IEP approved by total committee

Committee Members

Teacher

Other LEA representative

Parents

Date IEP initially approved: 10/14/78

Health Information

Vision: 20/20 - both eyes

Hearing: Good

Physical: Good

Other:

Yearly Class Schedule

	Time	Subject	Teacher
1st semester	Period I	English	Mrs. Crantz-Resource
	Period II	Print Shop	Mr. Quatro
	Period III	Math	Mr. Simon - Resource
	Period IV	Career Awareness	Mr. George
	Period V	Lunch	
	Period VI	Earth Science	Mrs. Cohen
	Period VII	P.E.	Mr. Schmidt
2nd semester			

Testing Information

Test Name	Date Admin.	Interpretation
W.R.A.T.	9/23/78	R=4.5 S=5.0 M=4.6
Key Math	9/24/78	Total - 5.3
Woodcock	9/25/78	Total - 4.76
WISC	9/26/78	V=85 P=96 F=88

Identification Information

Name Robert Fredericks

School Thomas Jefferson

Birthdate 5/18/64 Grade 9

Parent's Name Mr. & Mrs. Fredericks

Address 4006 Main Street

Phone: Home 329-4765 Office 378-9129

Continuum of Services

	Hrs. per week
Regular class	20
Resource teacher in regular classroom	
Resource room	10
Reading specialist	
Speech/language therapist	
Counselor	
Special class	
Transition class	
Others:	
Consultant teacher	3
(Mr. Snider)	
Social Worker	1

Individual Education Program (IEP)

Student's Name Robert Fredericks Subject Area English

Level of Performance Can identify words at 6th grade level; Can comprehend words on 4th grade level Teacher Mrs. Crantz

Annual Goals:
1. Robert will successfully identify 50 new seventh grade level words.
2. Robert will successfully complete a fifth grade basal reader.
3. Robert will demonstrate comprehension of new words learned and 5th grade reading material.

	September	October	November	December	January
Objectives	10/15/78 1. Identify 10 new 7th grade words when presented visually with 100% accuracy 2. Read 2 stories from high interest/low vocabulary material with 75% accuracy in word recognition on one page sample tests	1. Identify 20 new 7th grade words when presented visually with 100% accuracy 2. Read 2 stories from high interest/low vocabulary material with 75% accuracy in word recognition on one page sample tests.	1. Identify 20 new 7th grade words when presented visually with 100% accuracy 2. Read 2 stories from high interest/low vocabulary material with 75% accuracy. 3. Read one story from a 5th grade Basal Reader with 70% accuracy in word recognition on one page sample tests.	Evaluation	
Materials	1. Flash cards, oral dictation 2. Commercial high interest/low vocab. reader	1. Flash cards, oral dictation 2. Commercial high interest/low voc reader	1. Flash cards, oral dictation 2. Commercial high interest/low voc. reader		
Evaluation Agent	Resource teacher	Resource teacher	Resource teacher		
	1. Basal test question 2. Informal written & oral test question	1. Basal test question 2. Informal written & oral test question	1. Basal test question 2. Informal written & oral test question		

52

53

Individual Education Program (IEP)

Student's Name Robert Fredericks Subject Area Mathematics

Level of Performance Can compute addition, subtraction, & multiplication at 4.5 grade level Teacher Mr. Simon

Annual Goals:
1. Robert will compute problems in Addition, subtraction, & multiplication at the 6th grade level.
2. Robert will compute problems using fractions, decimals and division at the 5th grade level
3. Robert will demonstrate the ability to utilize money in the classroom and real life situations.

	September	October	November	December	January
Objectives	10/15/78 - 1. Robert will compute 6th grade addition & subtraction using manipulative materials with 90% accuracy. 2. Robert will compute 5th grade addition & subtraction problems when presented visually & orally with 90% accuracy. 3. Robert will demonstrate the ability to make change in classroom role-playing situation.	1. Robert will compute 6th grade addition & subtraction problems using manipulative materials with 90% accuracy. 2. Robert will compute 6th grade addition & subtraction problems when presented visually & orally with 90% accuracy. 3. Robert will demonstrate the ability to make change in classroom role-playing situation.	1. Robert will compute 4th grade multiplication & division problems using manipulative materials with 90% accuracy. 2. Robert will compute 4th grade multiplication & division problems when presented visually & orally with 90% accuracy 3. Robert will demonstrate the ability to make change in a local store	Evaluation	
Materials	1. Cuisenaire Rod 2. Abacus 3. Teacher made materials	1. Cuisenaire Rod 2. Abacus 3. Teacher made materials	1. Cuisenaire Rod 2. Abacus 3. Teacher made materials		
Evaluation	Resource Teacher	Resource Teacher	Resource Teacher	Committee	
Evaluation	Teacher made written & oral tests	Teacher made written & oral tests	Teacher made written & oral tests		

Glossary

Glossary

Adaptive Behavior: Refers to such behaviors as sensory motor skills, commmunication, self-help, socialization, academic progress, and vocational skills.

Age-equivalent Score (A.E.): A way of reporting test scores in which the score is equal to that of an average child of that age. Age equivalent means that a child's raw score is the average (medium or mean) performance for that age group. (Salvia and Ysseldyke, 1978).

Agnosia: The inability to obtain information through one of the input channels or senses, despite the fact that the receiving organ itself is not impaired. (Lerner, 1976)

Aphasia: Impairment of the ability to use or understand spoken language.

Expressive aphasia: Impairment of the ability to use spoken language.

Receptive aphasia: Impairment of the ability to understand spoken language.

Childhood aphasia: The inability to acquire verbal-expressive ability.

(Kirk and Gallagher, 1979)

Apraxia: Found in children who are unable to imitate words even though they understand the words. (Kirk and Gallagher, 1979)

Architectural Barriers: Any structure which could prevent a handicapped person from using a building and/or services.

At No Cost: Means that all specially-designed instruction is provided without charge, but does not preclude incidental fees which are normally charged to non-handicapped students or their parents as a part of the regular education program. (Federal Rules and Regulations 121a.14(b)(1).

Audiology: Includes: a) identification of children with hearing loss; b) determination of the range, nature, and degree of hearing loss, including referral for medical or other professional attention for the habilitation of hearing; c) provision of habilitative activities, such as language habilitation, auditory training, speech reading (lip-reading), hearing evaluation, and speech conservation; d) creation and administration of programs for prevention of hearing loss; e) counseling and guidance of pupils, parents, and teachers regarding hearing loss; and f) determination of the child's need for group and individual amplification, selecting, and fitting an appropriate aid, and evaluating the effectiveness of amplification. (Federal Rules and Regulations 121a.13(b)(1))

Auditory Perception: Is to differentiate characteristics of and impose structures on auditory stimuli. (Sabatino and Miller, 1979).

Autism: A severe behavioral disorder affecting the way sensory input is processed, causing problems in learning, communications, and relationships with others. (Schmidt, 1978).

Basal Reader: Any of a series of books designed to teach reading. A method of teaching reading in which instruction is given through the use of a series of basic readers. Such reading books are generally found in the elementary classroom and will frequently contain stories, activities, and skills representing the age and interest of the school age population.

Behavior Disorder: The child exhibits an affective disorder and/or adaptive behavior which significantly interferes with his or her learning and/or social functioning.

Behavior Modification: A technique of changing human behavior based on the theory of operant behavior and conditioning. Careful observation of events preceding and following the behavior in question is required. The environment is manipulated to reinforce the desired responses, thereby bringing about the desired change in behavior. (Lerner, 1976)

Body Image: An awareness of one's own body, the relationship between body parts, and the relationship between the body and the outside environment.

Brain Injured Child: A child who has experienced an injury or infection to the brain, resulting in disturbances in learning ability and/or general functioning.

Case Study Evaluation: Means a series of in-depth multidisciplinary diagnostic procedures, conducted within an established time frame and designed to provide information about the child, the nature of the problems which are or will be affecting his/her educational development, and the type of intervention and assistance needed to alleviate these problems. (State Rules and Regulations 1.01)

Civil Action: A formal suit in a court of law.

Cognition: The act or process of knowing or thinking.

Consent: 1) Means that the parent(s): a) has been informed of all

necessary information; b) understands and agrees in writing to carrying out the activity for which consent is sought; and c) understands that the granting of consent is voluntary on his/her part and may be revoked at any time. (State Rules and Regulations 1.01a)

2) Consent should be obtained from the parent before: a) conducting any case study evaluation or reevaluation of the child; b) initial placement of an exceptional child in a program providing special education and related services. (State Rules and Regulations 9.06)

Continuum of Alternative Placements: Means the availability of different types of educational environments, for example: regular classes, resource room classes, self-contained classes, day and residential special schools, home instruction, hospital instruction, and institutional instruction. (State Rules and Regulations 1.01b)

Counseling Services: Means services provided by qualified personnel such as: social workers, psychologists, guidance counselors, or other qualified personnel. (State Rules and Regulations 1.01c)

Day School (Special Day School): A type of special education placement in which a child is sent to a school (usually private) where the child is educated with other children with similar handicaps.

Delivery System(s): The various ways of offering educational series to children, e.g., self-contained classes, resource rooms, regular classrooms, etc.

Developmental Period: See Mental Retardation

Disability: A deviation in body or functioning that results in functional inadequacy in view of environmental demands. (Smith and Neisworth, 1975)

Due Process: The set of legal requirements that guarantee that the educational and civil rights of the handicapped child, the child's parents, and the school, are protected.

Due Process Hearing: That part of due process in which disagreements between a parent and a school can be resolved. Both the school and the parent(s) get to present their evidence to an impartial hearing officer who decides which is the best plan of action for the child.

Dyslexia: A medical term used to describe a reading handicap resulting from a neurological injury or dysfunction.

Early Identification: Means the implementation of a formal plan for identifying a disability as early as possible in a child's life. (Federal Rules and Regulations 121a.13(b)(3))

Educable Mentally Retarded (EMR): A child or individual with a deficiency in the ability to learn and whose intellectual quotient ranges between 68 and 52. This individual is sometimes referred to as borderline or mildly retarded.

Electroencephalograph (EEG): An instrument for recording and measuring electrical energy generated by the brain.

Emotionally Disturbed: An individual who is constantly at variance with individuals and/or his environment. This condition can be the result of physiological, biological, psychological and/or environmental factors.

Endogenous: Either inherited trait, genetically determined trait, or the result of a biological and/or physiological problem experienced by the child's mother.

Etiology: The case or origin of a condition.

Evaluation: Means procedures used to determine whether a child is handicapped and the nature and extent of the special education and related services that the child needs; procedures used selectively with an individual child and does not include basic tests administered to or procedures used with all children in a school, grade, or class. (Federal Rules and Regulations 121a.500)

Exogenous: A condition arising from other than hereditary or genetic factors, such as accidents or illness.

Figure-ground Perception: The ability to pay attention to one part of what you are looking at (for example, this ink) in relation to the rest of the "field" (for example, this paper).

Fine Motor: A term which refers to use of small muscles (usually writing or drawing).

Free Appropriate Public Education: Means special education and related services which: a) are provided at public expense, under public supervision and direction, and without charge; b) meet the standards of the state educational agency, including the requirements

of Part B EHA; c) include pre-school, elementary school or secondary school education; and are provided in conformity with an individualized education program. (Federal Rules and Regulations 121a.4)

Goal (instructional goal, annual goal): A general statement of what is expected of an individual.

Grade Equivalent Score (G.E.): A child's raw score is the average (medium or mean) performance for that grade. Grade equivalents are expressed in grades and tenths of grades; a decimal point is used in grade equivalent scores (for example 7.1).

Gross Motor: A term which refers to use of big muscles (as in running, climbing, throwing).

Guardian: A person who is permanently or temporarily appointed by a court to act in place of a parent.

Handicapped Children: Means those children evaluated as being mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, other health impaired, deaf/blind, multi-handicapped, or as having specific learning disabilities, who because of those impairments need special education and related services. (Federal Rules and Regulations 121a.5(a)) (Illinois uses the term "Exceptional Children")

Haptic: Determining shape by touching or holding in the hand.

Hearing Impairment: The child's residual hearing is not sufficient to enable him or her to understand the spoken word and to develop language, thus causing extreme deprivation in learning and communication. Or the child exhibits a hearing loss which prevents full awareness of environmental sounds and spoken language, limiting normal language acquisition and learning achievement.

Hearing Officer: The individual who runs the due process hearing, and who decides which of the options presented is best for the child. A hearing officer, who cannot be employed by the public school, must have sufficient knowledge about special education to make a fair and informed decision, and must be impartial. (Schmidt, 1978)

Homebound Instruction: An educational placement in which a special education teacher visits a child's home to provide the child with his/her educational program. This is usually reserved for children with severe handicaps that would make it difficult or

impossible for the child to go to school, for very young children, and for children whose parents must be included as an instructor of their own child.

Hyperactivity: A description of a physical or mental condition causing constant excessive movement.

Hyperkinesis: Constant and excessive movement.

Impulsivity: Acting spontaneously without considering the outcome(s) of the action.

Independent Evaluation: An evaluation of your child's ability by people not connected in any way with your public school.

Individualized Education Program (IEP): Means a written statement for an exceptional child that provides at least a statement of: the child's present levels of educational performance; annual goals and short-term instructional objectives; specific special education and related services; the extent to which the child will be able to participate in the regular education program; the projected dates for initiation of services; anticipated duration of services; appropriate objective criteria and evaluation procedures and schedules for determining at least on an annual basis whether instructional objectives are being achieved. (Federal Rules and Regulations 121a.341-121a.349 and State Rules and Regulations 1.02a)

Instructional Programs: Means those activities which provide the principal elements of the exceptional child's educational development at any given time. These activities may include any or all of the following: 1) evaluation of the nature of the child's educational needs; 2) amelioration of and compensation for visual, auditory, physical, speech or other impairments; 3) development of language concepts and communication skills; 4) educational experiences which are adjusted in content, emphasis, rate or location; and 5) modification of social skills or emotional adjustment. An instructional program is considered one in which the exceptional child spends 50% or more of his/her school day. (State Rules and Regulations 1.03)

Intelligence Quotient (I.Q.): A way of reporting intelligence test scores; originally an I.Q. was determined by dividing a person's age equivalent score by the child's actual age, and multiplying by 100.

Intermediate Educational Unit: Means any public authority, other than a local educational agency which: a) is under the general supervision of a state educational agency; b) is established by state

law for the purpose of providing free public education on a regional basis; and c) provides special education and related services to handicapped children within that state. (Federal Rules and Regulations 121a.7)

Kinesthetic: The ability of an individual to move through space while simultaneously sensing the relationships of their body to other objects or individuals in the environment.

Language Use Pattern: Means the language or combination of languages the child uses to conceptualize and communicate those conceptualizations. (State Rules and Regulations 1.04)

Laterality: Refers to the two sides of the body, and the ability to identify them as left or right correctly.

Least Restrictive Environment: Means that to the maximum extent appropriate, handicapped children are educated with nonhandicapped children. Special classes, separate schooling or other removal of handicapped children from the regular educational environment occurs only when the nature or severity of the handicap requires that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. (State Rules and Regulations 1.05)

Local Educational Agency: Means a public board of education or other public authority legally constituted within a state for either administrative control or direction of, or to perform a service function for public elementary or secondary schools in a city, county, township, school district, or other political subdivision of a state, or such combination of school districts or counties as are recognized in a state as an administrative agency for its public elementary or secondary schools. Such a term also includes any other public institution or agency having administrative control and direction of a public elementary or secondary school; also includes intermediate educational units. (Federal Rules and Regulations 121.8)

Least Restrictive Alternative: (See least restrictive environment)

Learning Disabled (specific learning disabled): Children who have difficulty with understanding or using language which may affect their ability to listen, think, speak, read, write, spell, or do arithmetic. These problems cannot be a result of visual, hearing or physical handicaps, of mental retardation, emotional disturbance or environmental disadvantage. (Illinois School Code 122-14-1.03).

Mainstreaming: The concept of placing handicapped individuals in a regular classroom or learning setting.

Maladjusted Children: Children who because of social or emotional problems are unable to benefit from regular class placement. (Illinois School Code, Sec. 122, 4-1.03)

Maturational Lag: A slowness in an area or areas of development (for example, a child may be said to have a maturational lag in motor development if she/he doesn't start walking at the age most children do)

Mental Retardation: Refers to significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior, and manifested during the developmental period. (Kaufman and Payne, 1975)

Subaverage Intellectual Functioning: Means earning a score on an intelligence test of two or more standard deviatio tions below the mean.

Adaptive Behavior: Refers to such behaviors as sensory motor skills, communication, self-help, socialization, academic progress, and vocational skills.

Developmental Period: Consists of those from birth to the age of nineteen.

American Association on Mental Deficiency: (Grossman 1973)

	Educable Mental Retardation Mild	Trainable Mental Retardation Moderate	Severely Retarded	Profoundly Retarded
95-90-85-80-75--	68-65-60-52---	51---------36--	35------20---	19 and Below →
	are functioning behind their age equivalents but can be taught when provided with appropriate instruction.	Capable of learning vocational and pre-vocational skills.	Capable of acquiring language & health needs in a highly supervised environment.	Needs complete and total care. Minimal response level and few reflexes.

Minimal Brain Dysfunction: A supposed minor malfunction in the way the brain works, frequently associated with learning disabilities.

Modality: The sensory mechanism (sight, hearing, touch) a person uses to learn.

Medical Services: Means services provided by a licensed physician to determine a child's medically related handicapping condition which results in the child's need for special education and related services (Federal Rules and Regulations 121a.13(b) (4))

Multidisciplinary Conference: Means a deliberation among appropriate professional persons, parents, and advocates for the purpose of determining eligibility for special education, developing recommendations for special education placement, reviewing educational progress or considering the continuation or termination of special education for an individual child.

Native Language: When used with reference to a person of no or limited English-speaking ability, means the language normally used by that person or in the case of a child, the language normally used by the parents of the child. Bilingual Education Act (703 (a)(2) and Federal Rules and Regulations 121a.9)

Neurological Examination: A special kind of physical examination that checks how well a person's nervous system works (this might include the nerves that make up the brain, the nerves in the spinal column, and nerve pathways in the hands and feet, reflexes, etc.)

Notice: Means that written notice which must be given to parents of exceptional children before the public agency proposes to or refuses to initiate or change the identification, evaluation or educational placement of the child or the provision of a free appropriate public education. (Federal Rules and Regulations 121a.504)

Objective (short-term objective, instructional objective, behavioral objective): A clear statement of what is expected of an individual. It should include: the conditions under which the behavior is to occur, a description of the behavior, and how the behavior is to be measured.

Occupational Therapy: Includes: a) improving, developing or restoring functions impaired or lost through illness, injury, or deprivation; b) improving ability to perform tasks for independent functioning when functions are impaired or lost; and c) preventing through early intervention, initial or further impairment or loss of function. (Federal Rules and Regulations 121a.13(b)(5)

Orthopedically Impaired: See physically handicapped.

Parent: Means a natural or adoptive parent, a guardian, a person acting as a parent of a child or a surrogate parent who has been appointed by the Illinois Office of Education. (State Rules and Regulations 1.06)

Parent Counseling and Training: Means procedures utilized in assisting parents in understanding the special needs of their child and providing parents with information about child development. (State Rules and Regulations 1.06a)

Perseveration: Continuing or repeating an activity (such as finger patting) to excess.

Percentile (percentile rank): A way of reporting scores that compares a child's score to an imaginary group of other children of similar age. For example, a percentile score of 23 means that if one hundred children had taken the test, this child would have done better than 23 of them. A score of 50 means that the child did better than 50 of the children, etc.

Perception: Organizing and/or interpreting information gathered through the senses.

Perceptual-motor: Coordination of body movements with the senses of sight, hearing and touch.

Physically handicapped: Persons who exhibit a physical or health impairment, which interferes with his or her learning and/or requires adaptation of the physical plant (building) (Illinois Rules and Regulations to Govern the Administration and Operation of Special Education, Section 9.16(3))

Placement (program placement): The type of program and/or setting in which a child will be educated (for example, a regular class, a self-contained class for the educable mentally retarded, or homebound instruction.)

Profoundly Handicapped: See Mentally Handicapped.

Public Agency: Includes the state educational agency, local educational agencies, intermediate educational units, and any other political subdivision of the state which are responsible for providing education to handicapped children, such as the Department of Mental Health or the Department of Corrections.

Physical Education: Means the development of: 1) physical and motor fitness, 2) fundamental motor skills and patterns, and 3) skills in aquatics, dance, and individual and group games and sports (including intramural and lifetime sports); and includes special physical education, adapted physical education, movement education, and motor development. (Federal Rules and Regulations 121a.14(b)(2))

Physical Therapy: Means services provided by a qualified physical therapist. (Federal Rules and Regulations 121a.13(b)(7))

Professional Worker: Means a trained specialist including speech correctionist, school social worker, school psychologist, psychologist intern, school social worker intern, special administrator intern, registered therapist, professional consultant, special administrator or supervisor giving full time to special education and teacher who has the required special training. (The School Code of Illinois, 14-1.10)

Psychological Evaluation: Shall be defined as an individual evaluation of the child's functioning in the cognitive, psychomotor, social/emotional, and academic achievement or aptitude areas using appropriately validated formal and informal tests and evaluation material. (State Rules and Regulations 1.06b)

Psychological Services: Include: a) administering psychological and educational tests and other assessment procedures; b) interpreting assessment results; c) obtaining, integrating, and interpreting information about child behavior and conditions relating to learning; d) consulting with other staff members in planning school programs to meet the special needs of children as indicated by psychological tests, interviews, and behavioral evaluations; and e) planning and managing a program of psychological services, including psychological counseling for children and parents. (Federal Rules and Regulations 121a.13(b)(8) (See "School Psychologist"-Chapter IV)

Recreation: Includes: a) Assessment of leisure function; b) therapeutic recreation services; c) recreation programs in schools and community agencies; and d) leisure education. (Federal Rules and Regulations 121a.13(b)(9))

Reevaluation: Means a series of diagnostic procedures which are performed for the purpose of determining a child's continued eligibility for special education. (State Rules and Regulations 1.07a)

Referral: Means a formal procedure, established by the local school district, by which a case study evaluation may be requested. (State Rules and Regulations 1.08)

Regular Class Placement: The type of program placement in which non-handicapped children are educated.

Related Services: Means the developmental, corrective, and other supportive services which are required to assist a handicapped child to benefit from special education. Such services include: speech pathology and audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities in children, counseling services, and medical services for diagnostic or evaluation purposes, transportation, school health services, social work services, and parent counseling and training (State Rules and Regulations 1.08a)

Residential School: A placement option in which children, usually with severe handicapping conditions, receive their education away from their home environment in a educational facility which has dormitory or cottage living facilities. Some placements provide for return home on holidays and weekends, other placements may be on a more permanent basis.

Resource Room: A type of instructional setting in which a child receives intensive instruction in specific areas (for example, math, spelling, language, or reading) for a part of the school day.

School Health Services: Means services provided by a qualified school nurse or other qualified persons. (State Rules and Regulations 1.09a)

Screening: Means the process of reviewing all children in a given group with a set of criteria for the purpose of identifying certain individuals for evaluations who may be in need of special education. (State Rules and Regulations 1.10)

Self-contained Class (Special Class): A type of special education placement in which a child receives most (or all) of his/her instruction in a class made up of children with similar handicaps. A self-contained class usually is in a regular school building.

Sensory Motor: See Perceptual Motor

Severely Retarded: See Mentally Retarded

Social Developmental Study: Means a compilation and analysis of information concerning those life experiences of the child, both past and present, which pertain to the child's problems and/or to the

possible alleviation of those problems (State Rules and Regulations 1.11)

Social Work Services in Schools: Includes: a) preparing a social or developmental history on a handicapped child; b) group and individual counseling with the child and family; c) working with those problems in a child's living situation (home, school, and community) that affect the child's adjustment in school; and d) mobilizing school and community resources to enable the child to receive maximum benefit from his or her educational program. (Federal Rules and Regulations 121a.13(b)(11)) (See "School Social Worker" Chapter IV)

Special Education: Means those instructional and resource programs and related services, unique materials, physical plant adjustments, and other special educational facilities described or implied in Article XIV of The School Code of Illinois which, to meet the unique needs of exceptional children, modify, supplement, support or are in the place of the standard educational program of the public schools.

Special Education Placement: Means the provision of specified special education services, including and limited to a special education instructional program, resource program, special education related services, speech and language services, homebound services, hospital services, referral to a non-public program or a state-operated facility. (State Rules and Regulations 1.13) or the actual setting (receiving school, classroom, and programs in which the child will be served; it is a multi-step process which includes: 1) determination of need for special education; 2) nature (category) and intensity (resource room, self-contained, etc.); 3) actual attendance center or facility for classroom setting and teacher.

Special School: Means an educational setting which is established by the local school district exclusively to meet the needs of exceptional children. (State Rules and Regulations 1.14)

Speech and/or Language Impairment: The child exhibits deviations of speech and/or language processes which are outside the range of acceptable deviation within a given environment and which prevent full social or educational development.

Speech Pathology: Includes: a) identification of children with speech or language disorders; b) diagnosis and appraisal of specific speech or language disorders; c) referral for medical or other professional attention necessary for the habilitation of speech or language disorders; d) provisions of speech and language

services for the habilitation or prevention of communicative disorders; and e) counseling and guidance of parents, children, and teachers regarding speech and language disorders. (Federal Rules and Regulations 121a.13(b)(12) (See "Speech/ Language Clinician" - Chapter IV)

Special Transportation: Means those transportation services which are required because of the child's exceptional characteristics or the location of the special education program or related services, and which are in addition to the regular transportation services provided by the local school district. (State Rules and Regulations 1.15)

Standard Educational Program: Means the educational program generally offered by the local school district to the majority of its students. (State Rules and Regulations 1.16)

Staffing: A meeting at which the educational staff, the administrative staff, the evaluation team staff, and when possible the parents of a child, discuss the child's educational program and progress.

State Education Agency (SEA): In this case the Illinois State Board of Education

Subaverage Intellectual Functioning: See Mental Retardation

Support Services: Those services which are provided to a child, a parent or a teacher, which a regular class teacher would not normally provide (for example, remedial reading or speech therapy)

Surrogate Parent: Means a person who acts in the educational behalf of an exceptional child in accordance with Article XI of the State Rules and Regulations. (State Rules and Regulations 1.17)

Task Analysis: Breaking down a complex task (such as an instructional objective) into simpler, smaller parts.

Trainable Mentally Handicapped: See Mental Retardation

Visual Impairment: The child's visual impairment is such that the child cannot develop his or her educational potential without special services and materials.

Vocational Education: Means organized educational programs which are directly related to the preparation of individuals for paid or unpaid employment, or for additional preparation for a career requiring other than a baccalaureate or advanced degree. (Federal Rules and Regulations 121a.14(b)(3))

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Sabatino, D.A. and Miller, T.L. (eds.). Describing Learner Characteristics of Handicapped Children and Youth. New York: Grune and Stratton, Inc., 1979.

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Selected Annotated Bibliography on Mainstreaming

Alberto, P.A., and others. Mainstreaming: Implications for Training Regular Class Teachers. Education and Training of the Mentally Retarded, February 1978, 13(1), pp. 90-92.

Using the questionnaire responses of 2186 regular classroom elementary school teachers in Georgia, the author found the teachers' instructional strengths, weaknesses, and training needs as related to their ability to work more effectively with mildly handicapped children.

Alexander, D., and Strain, P. A Review of Educators' Attitude Toward Handicapped Children and Concept of Mainstreaming. Psychology in the Classroom, July 1978, 15(3), pp. 390-96.

Literature is reviewed related to the attitude of educators toward handicapped children and the concept of mainstreaming these youngsters into regular class settings. The literature also reviews the relationship between teachers' attitudes toward the individual pupils and the different instructional treatments used with those children.

Birch, J.W. Mainstreaming: Educable Mentally Retarded Children in Regular Classes. University of Minnesota: Leadership Training Institute/Special Education.

Special services should concentrate on an individual's learning problems, not categorical handicaps. The author strongly feels that as many children as possible should be educated in the mainstream. He also believes that an integrated environment will help prevent students from being labeled.

Bird, P.J., and Gansneder, B.M. Preparation of Physical Education Teachers as Required Under Public Law 94-142. Exceptional Children, March, 1979, 45(6), pp. 464-66.

Questionnaires were sent to 912 physical educators to assess the level of preparedness of public school physical educators in order to meet the physical education requirements of Public Law 94-142.

Brenton, M. Mainstreaming the Handicapped. Today's Education, Mar/Apr. 1974, 63(2), pp. 20-23.

According to the author, mainstreaming is a rapidly growing phenomenon used to identify students' needs and readiness skills. It also provides back-up services to assist handicapped students in dealing with the real world.

Burt, R.A. Judicial Action to Aid the Retarded. In N. Hobos (ed.). Issues in the Classification of Children. (vol. II). San Francisco: Jossey Bass, 1975.

The educational policy of placing the retarded together in institutions is not beneficial to the retarded. However, questions arise as to what placement alternatives will be effective.

Forness, S.R. The Mildly Retarded as Casualties of the Educational System. Journal of School Psychology, June 1972, 10(2), pp. 117-124.

The author points out that the labels imposed upon the handicapped students result from the faults within the educational system itself. There is a great need to develop an appropriate means for identifying these students without imposing labels.

Gadson, R.D. Queries from the Classroom: Should Special Classes for the Educable Mentally Retarded be Disbanded? The Pointer, Spring 1973, 17(3), pp. 166-67.

One cannot assume that the educational needs of the mentally handicapped can be met in every classroom. The author believes that it is unrealistic to expect students to receive individual attention in the regular classroom.

Gallagher, J.J. Phenomenal Growth and New Problems Characterize Special Education. Phi Delta Kappan, April 1974, 55(8), pp. 516-18.

The author discusses the major trends in special education. He points out that the ideas of mainstreaming oppose the ideas of the generalists in that the latter does not welcome handicapped students into the regular classroom.

Goodman, L. and Price, M. BEH Final Regulations for Learning Disabilities: Implications for the Secondary School. Learning Disability Quarterly, Fall 1978, 1(4), pp. 73-79.

The regulation implementing Public Law 94-142 raises several concerns about their implications for the learning disabled secondary students.

Jones, R.L., and others. Evaluating Mainstreaming Program: Models, Caveats, Consideration, and Guidelines. Exceptional Children, May 1978, 44(8), pp. 588-601.

The author presents various kinds of practical and theoretical issues pertinent to the evaluation of mainstreaming programs.

Mandell, C.J., and Strain, P.S. An Analysis of Factors Related to the Attitude of Regular Classroom Teachers Toward Mainstreaming Mildly Handicapped Children. Contemporary Educational Psychology, April 1978, 3(2), pp. 154-62.

Significant predictors of a positive attitude toward mainstreaming include: team teaching, years of experience (negative correlation), courses in diagnosing learning and behavior problems, previous special education teaching experience, special education courses, size of class, and inservice program experience related to exceptional children.

Massie, D. Update on Education of the Handicapped. Today's Education, Sept.-Oct. 1978, 67(3), pp. 60-62, 73.

Problems faced by teachers and schools in educating handicapped students are described and recommendations for improving the situation are given.

Maurer, A. Whatever Happened to Witches? Journal of School Psychology, June 1972, 10(2), p. 107.

The author is against labelling the handicapped student. She strongly believes that the slower students may be able to benefit from some of the discarded teaching methods for the gifted and normal students.

Moore, J., and Fine, M.J. Regular and Special Class Teachers' Perceptions of Normal and Exceptional Children and Their Attitudes Toward Mainstreaming. Psychology in the School, April 1978, 15(2), pp. 253-59.

A sample of 61 teachers were asked to complete the Leary Interpersonal Check List on Hypothetical EMH, LD, and normal ten-year-old males. The teachers also answered 15 multiple choice questions on mainstreaming. Findings indicated that the three groups of teachers were in agreement in viewing the child types differently.

Newberger, D.A. Situational Socialization: An Affective Interaction Component of the Mainstreaming Reintegration Construct. Journal of Special Education, Summer 1978, 12(2), pp. 11-21.

The idea presented is a mainstreaming paradigm--situational socialization--which is the process component of an input-process-output model. This model represents the process of acquiring the new knowledge, behavior, and attitudes that both normal and mild-to-moderately handicapped learners need to achieve success in interpersonal relationships.

Owsley, P.J. Can a Residential School Program Students into Public Schools? Volta Review, January 1973, 75(1), pp. 28-31.

The author conducted a survey of the parents of hearing impaired students at Mystic Oral School. The findings showed that the hearing impaired students in a residential school can be successfully integrated into the regular classroom.

Pappanikou, A.J., Kochanek, T.T., and Reich, M.L. Continuity and Unity in Special Education. Phi Delta Kappan, April 1974, 55(8), pp. 546-48.

The model of functional levels in diagnosis and intervention is aimed at mainstreaming. Essentially, the model involves a continuum of special education services facilitating mobility for the handicapped students.

Silverman, M. Beyond the Mainstreaming: The Special Needs of the Chronic Child Patient. American Journal of Orthopsychiatry, January 1979, 49(1), pp. 62-68.

The author believes that behaviorally disturbed children have the rights and needs to be different. Thus, a simplistic insistence on equality through mainstreaming (as mandated in P.L. 94-142) may violate those rights and needs of some of these students.

Simons, E.P., and Gillman, A.E. Mainstreaming Visually Handicapped Preschoolers. Exceptional Children, March 1979, 45(6), pp. 463-64.

The article explores the effects of mainstreaming four visually handicapped preschool children in a sighted preschool program. The need for extensive preparation is prerequisite to the success of mainstreaming programs.

Warbasse, V. Please, Teachers--Teach Those Kids! Education and Training of Mentally Retarded, October 1977, 12(3), pp. 248-50.

Regular and special class placement of handicapped children is discussed in terms of teacher needs, individualized programming, research, and the role of individuals other than the teachers who are responsible for programs in special classrooms.

Westling, D.L., and Joiner, M.D. Consulting with Teachers of Handicapped Children in the Mainstream. Elementary School Guidance and Counseling, February 1979, 13(3), pp. 207-13.

The author suggests some useful approaches for school counselors to use when consulting with teachers who are attempting to provide the least restrictive environment for handicapped children.

White, W., and others. Self-concept Correlates in Academic Placement of Secondary School Students. Perceptual and Motor Skills, April 1978, 46(2), pp. 360-62.

Forty-three eighth graders assigned to vocational education courses on the basis of low standardized test scores in reading and math were administered a self-concept inventory, the Me Scale. The results are discussed in the article.

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INDEX

Administration

Cruickshank, 1977
Gage, 1979
Heron, 1978
Melcher, 1972
Miller, 1978
Morrison, 1978
Orelove, 1978
Rebore, 1979
Schultz, 1973
Shannon, 1974
Shrybman, 1978

Architecture/Facilities

Abeson, 1971
Aiello, 1976
Birch, 1975
Goodman, 1979
Gottlieb, 1973
Redden, 1976

Art

Anderson, 1975
Appell, 1979
Art, 1975
Gair, 1978

Assessment

Hardin, 1978
Hatch, 1979
Jobes, 1977
Mcwder, 1979
Nazzaro, 1975
Quinones, 1978
Salvia, 1978
Zinkus, 1979

Attitude/Social Acceptance

Carpenter, 1979
Clark, 1976
Gross, 1978
Harasymiw, 1975

Attitude/Social Acceptance cont.

Harasymiw, 1976
Hersh, 1977
Horne, 1979
Hughes, 1978
Jones, 1974
Jones, 1974
Mandell, 1978
McKalip, 1979
Ross, 1978
Rucker, 1974
Stern, 1978
Vandivier, 1979
Wright, 1973
Zakiriya, 1978

Background/History

Balthajar, 1975
Reynolds, 1976
Wolfensberger, 1973

Cultural Minority

Aragon, 1974
Connor, 1972
Gottlieb, 1976
Jones, 1976
Jones, 1976
Mowder, 1979
Renzulli, 1973
Renzulli, 1971
Shiman, 1978

Curriculum

Brown, 1978
Christianson, 1978
Craig, 1976
Dunn, 1968
Kunzweiler, 1979
Thiagarajan, 1976

Drugs

Adelman, 1977
Ayllon, 1975
Bosco, 1977
Lewitt, 1974

Efficacy and Placement

Calhoun, 1974
Gampel, 1974
Gottlieb, 1975
Grosenick, 1974

Emotionally Disturbed/
Behavior Problems

Calhoun, 1977
Calhoun, 1978
Cawley, 1973
Deno, 1978
Lovitt, 1978
Morse, 1971
Morse, 1976
Papanikou, 1977
Ramsey, 1978
Schultz, 1973

General, Theory

Blatt, 1977
Gardner, 1977
Gearhart, 1976
Reynolds, 1977

Hearing Impaired

Beckman, 1978
Birch, 1975
Birch, 1976
Bitter, 1973
Bitter, 1973
Bruininks, 1974
Coleman, 1975
Connor, 1976
Craig, 1975
Craig, 1976
Fleming, 1977
Kennedy, 1974
Kennedy, 1976
Kindred, 1976
Lowe, 1978
Moores, 1978
Reich, 1977
Vernon, 1977

Higher Education

Bevilacqua, 1979
Mann, 1976
Miller, 1979
Reger, 1974
Vace, 1978

Individualized Education

Boyer, 1979
Carroll, 1975
Coleman, 1975
Dunn, 1979
Gittins, 1978
Heisner, 1979
Hudson, 1978
Kameen, 1979
Martin, 1978
Peter, 1975
Reynolds, 1978

Labels

Forness, 1974
Forness, 1976
Gallagher, 1976
Hobbs, 1975
Hobbs, 1975
Trotter, 1975
Wolfensberger, 1974

Language Arts/Reading

Cohen, 1978
Degler, 1979
Doehring, 1978
Ewoldt, 1978
Jenkins, 1978
Lerner, 1975
Pany, 1978
Peters, 1979
Ruphey, 1979
Satz, 1978
Scofield, 1978

Learning Disabilities

Gardner, 1977
Hallahan, 1976
Lerner, 1976
Ross, 1976
Sabatino, 1972

Mentally Retarded

Ballard, 1977
Begab, 1975
Bender, 1978
Blatt, 1967
Gottlieb, 1976
Payne, 1979

Normalization

Blatt, 1969
Hersh, 1977
Lieberman, 1974
McIntosh, 1979
National Advisory, 1976
Reyonlds, 1977
Reynolds, 1978
Sapon, 1978
Scheerenberger, 1974
Wolfensberger, 1972

Parents

Albeson, 1978
Beseler, 1978
Biklen, 1974
Burggraf, 1979
Buscaglia, 1975
Gorham, 1975
Losen, 1978
O'Donnell, 1977
Pieper, 1974
Powell, 1978
Shepherd, 1973
Stoebner, 1979
Wolfensberger, 1974

Physical Education

Arnheim, 1977
Bird, 1979

Physical Education (cont.)

Carl, 1978
Drummer, 1977
Grosse, 1975
Humphrey, 1976
Kraus, 1973
Priest, 1979
Vannier, 1977
Winnick, 1978

Physically Handicapped

Bigge, 1976
Edgington, 1976
Hoggan, 1978

Placement

Cegelka, 1978
Haring, 1975
Joiner, 1978
Owen, 1978
Regular, 1971
Regular, 1972
Rubin, 1973
Taylor, 1973
Univer, 1978
Vandivier, 1979
Wilkers, 1979
Yoshida, 1978

Resource Programs

Bruininks, 1974
Childs, 1975
D'Alonzo, 1978
Gickling, 1979
Glavin, 1974
Jenkins, 1976
Lauder, 1979
Lewis, 1974
Morrill, 1979
Reger, 1972
Swart, 1979

Secondary

Brown, 1976
Clark, 1975
DeSalle, 1976
Egner, 1973
Goodman, 1976
Goodman, 1978
Kindred, 1976
Krug, 1976
Laurie, 1978
McCarthy, 1979
McCarthy, 1979
National Education, 1975
Sabatino, 1978
Shepherd, 1967

Teachers/Regular Classroom

Christoplos, 1973
Clark, 1976
Edgington, 1976
Harasymiw, 1975
Harasymiw, 1976
Kendall, 1978
Moran, 1976
Mori, 1979
Shaw, 1975
Vandivier, 1979

Teaching Strategies

Aiello, 1975
Aiello, 1976
Bouch, 1979
Budoff, 1976
Diamond, 1979
Haring, 1975
Haring, 1976
Haring, 1976
Mann, 1974
Meyer, 1978
Ritter, 1978
Schiff, 1979
Stroud, 1978

Textbooks

Gearhart, 1976
Hammill, 1975
Haring, 1976
Reynolds, 1977

Visually Handicapped (V.I. or V. Hand

Avery, 1977
Mangold, 1978
Martin, 1977
Porter, 1978
Rogow, 1978
Simon, 1979
Vermëÿ, 1978

Vocational

Becker, 1979
Brolin, 1976
Cegelka, 1976
Davis, 1979
Fads, 1975
Gugerty, 1978
Kindred, 1976
May, 1978
Meers, 1977
Oppert, 1975
Post, 1977
Quinones, 1978
Reynolds, 1978
Rumble, 1978
Sarandoulias, 1975

Illinois Agencies

National Agencies

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Advocates for the Handicapped
2200 Merchandise Mart
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Chicago Lighthouse for the Blind
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Concerned People for Exceptional Children
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Department of Children and Family Services
Gregory Coler, Director
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Department of Corrections
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School District 428
400 Armory Building
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Department of Mental Health and Developmental Disabilities
Dr. Robert deVito, Director
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